

Mental health first aid training works despite recent reports, say researchers

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More than 6 million people worldwide have been trained in Mental Health First Aid.



Mental Health First Aid (MHFA) training aims to equip members of the public with the skills to recognize and respond when someone is experiencing a mental health problem or crisis. Like physical first aid, mental health first aid is the help provided to a person until they can get appropriate professional help or the crisis resolves.

But a recent <u>review of the effectiveness of the training</u> published by the medical not-for-profit organization, The Cochrane Collaboration, has <u>led some to question</u> whether this training should play such a key role in improving population mental health.

However, this kind of discourse risks misleading the public about the well-researched benefits of the training.

It may mean fewer people choose to receive valuable training in how to support people with <u>mental ill health</u>.

The benefits of training

MHFA training was developed to improve mental health literacy and give people the skills to connect someone with the appropriate support. MHFA courses are popular and more than 1 million Australians have been trained.

Many good quality studies have evaluated the effectiveness of MHFA training. In 2018, we <u>synthesized the findings</u> from randomized controlled trials—the gold standard in understanding the effectiveness of a treatment or program.

Our review found that Mental Health First Aid training led to myriad benefits.

It improved recognition of mental health problems, provided better



knowledge of effective treatments and how to offer support, gave people more confidence to offer support, led to an increase in the amount of support offered and a reduction in stigmatizing attitudes.

Our team then did <u>further research</u> that showed that MHFA training is one of only a handful of programs in Australia that has good evidence on its impact on mental health stigma.

But we also found that the research could not yet answer an important question: does mental health first aid lead to better mental health in people who receive help?

'Very uncertain' evidence

The Cochrane Collaboration is a global network of researchers, <u>health</u> <u>professionals</u>, patients and caregivers that publishes summaries of health research and is respected for its rigorous reviews that focus on randomized controlled trials.

The recent Cochrane review, which we were not involved in, attempted to answer the above question by reviewing more recent evidence.

The Cochrane review found that there was still not enough evidence to show that training leads to better mental health. In summarizing, the researchers wrote, "When MHFA training was compared with no intervention, it may have little to no effect on the mental health of individuals at six to 12 months, but the evidence is very uncertain."

That last phrase—"very uncertain"—is important.

The review included only three studies that examined this specific question. Several of these studies assessed mental health outcomes in everyone in the study, regardless of whether they had received mental



health first aid.

It's this point that makes it difficult to tease out any effect of the MHFA training.

Some people have interpreted the findings to mean that the training is not effective. But absence of evidence is not evidence of absence.

What me mean by this is that there's a big difference between (a) we have good quality evidence that something does not work, and (b) we don't have enough evidence to show whether something works or not. This is a (b) situation.

The review also found no studies looking at whether training can harm people. But this is because <u>harms are typically investigated in MHFA</u> <u>evaluations</u> that aren't eligible for inclusion in a Cochrane review.

Assessing the effect of MHFA training on mental health using the Cochrane methodology is difficult to do because of the way researchers need to collect information from people who were helped by someone who did the training.

There are ethical and practical difficulties in collecting this data as part of a randomized controlled trial.

A comparison with physical first aid training is apt.

There are <u>surprisingly few randomized trials</u> of first aid training and these only examine the knowledge, <u>confidence and skills of trainees</u>. We couldn't find any good quality trials of physical first aid training that have demonstrated health benefits in people who received help for a <u>medical emergency</u> from someone trained in general first aid.



Does this mean we should stop providing general first aid training?

Obviously not. First aid training is strongly recommended because it's supported by <u>international consensus</u> on effective first aid techniques. Similarly mental health first aid training is supported by <u>international consensus</u> on <u>effective mental health first aid techniques</u>.

Understanding the impact of mental health first aid

Whether or not Mental Health First Aid training improves mental health depends on many factors that occur after the first aid is administered, including whether the person helped goes on to seek professional help and how beneficial any treatment is.

Evaluating this downstream effect on mental health is important and our team is working on alternative research designs to understand the impact of receiving mental health first aid. This includes understanding the impact of professional help, relationship changes and whether the person helped felt supported and not stigmatized.

Mental Health First Aid training is not meant to be the only solution to improving the mental health of the community. But we do know that people who may be struggling with their mental health <u>can take a long time to seek help</u>.

Poor mental health <u>is common</u>, and many of us will know someone with a problem but may not know how to help them.

There is good evidence that MHFA improves knowledge and helping skills—and this can help people get appropriate help earlier than they might with no intervention.

Of course, we do need more research to understand how MHFA impacts



on mental <u>health</u>, but we already know there are enough benefits to recommend MHFA <u>training</u>.

Provided by University of Melbourne

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